Colorado Secretary of State Elections Division 1700 Broadway, Suite 200 Denver, CO 80290 1303) 894-2200 1303) 869-4861 Email: cpfhelp2505.state Co.us Website: www.sos.state co.us



## RECEIVED HICE Use Only

CITY OF ENGLEWOOD, CO

AUG 3 0 2017

Morardo Sacratary of State Form CPF-40 Boy 5/7013



FORM FOR AMENDMENT(S) TO EXISTING COMMITTEE REGISTRATIONY CLERK

(1-45-108, C.R.5.)(Rule 12.1)

Please use this form if you are amending an existing committee registration

| Existing Committee Name: C; +: tans for So SOS iD/Key#:   | · Jefferson For Engleward Judge               |
|---|---|
| What changes need to be made? Please check all that apply, and fill in the appropriate section of the form.  ☐ Committee Name ☐ Committee Contact Information ☐ Committee Purpose ☐ Financial Institution Information ☐ Designated Filing Agent Information |   |
| Committee Contact Information:  |   |
| Committee Name Change:  |   |
| Committee Wariess (Didasiral).  |   |
| Committee Address (mailing):  |   |
| Committee Address (mailing):  Phone Number:  Alternate Phone  | Number: Fax Number:                           |
| Please note that this form cannot be used to change the office sought   |   |
| Purpose (include party, office, district & election year, if applicable):   |   |
|   |   |
| Financial Institution Information:  |   |
| stitution Name:   |   |
| Institution Address:  | * *************************************       |
| Registered Agent Changes:   | Designated Filing Agent Changes:              |
| Current Registered Agent:   | Current Designated Filing Agent:              |
| Name: Joseph Safferson  |   |
| Phone Number: 120-373-5679  | Name:   |
| E-mail Address: josje F1224 Cginestian  | Phone Number:                                 |
| At line we will a   | E-mail Address:                               |
| Alternate E-mail 1:   | Alternate E-mail 1:                           |
|   | New Designated Filling Agent:                 |
| Name: Julia Kiewt   | Name:   |
| Phone Number: 363-599-2198  | Phone Number:                                 |
| E-mail Address: it lica Kiel ita cumil con  | F-mail Address                                |
| E-mail Address: juliag Kieuitogwail.com Alternate E-mail 1:   | E-mail Address:                               |
| Alternate E-mail 2:   | Alternate E-mail 1:                           |
|   | Alternate E-mail 2:                           |
| If the person acting as registered agent is changing, please list the new agent's name and address. Both agents must sign this form. If the existing agent is not available, please attach an explanation.  |   |
|   |   |
| red Agent's Signature   | , Current Designated Filing Agent's Signature |
| Date ♥  | 29/17   |
| Ali Kinit   | [00.11]                                       |
| July July   |   |
| Néw Registered Agent's Signature (if applicable)  | ew Designated Filing Agent's Signature        |
| for solversame  |   |
|   |   |